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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Applicants : Henry Wu  
Appl. No. : 09/943,483  
Filed : August 29, 2001  
For : FOLDING CHAIR  
Examiner : Brian Green  
Group Art Unit : 3611

I hereby certify that this correspondence and all marked attachments are being deposited with the United States Postal Service as first-class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on

January 16, 2004  
(Date)

Michael H. Trenholm Reg. No. 37,743

RESPONSE TO OFFICE ACTION

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

RECEIVED  
FEB 04 2004  
GROUP 3600

Dear Sir:

In response to the Office Action mailed July 17, 2003, please amend the above-captioned application as follows:

**Amendments to the Specification** begin on page 2 of this paper.

**Amendments to the Claims** are reflected in the listing of claims which begins on page 4 of this paper.

**Amendments to the Drawings** begin on page 7 of this paper. An "Annotated Marked-up Drawings" and corresponding "Replacement Sheet" for each sheet of drawings being amended can be found in the Appendix.

**Summary of Interview** begins on page 8 of this paper.

**Remarks** begin on page 9 of this paper.

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## AMENDMENT / RESPONSE TRANSMITTAL

Applicant : Henry Wu  
 App. No. : 09/943,483  
 Filed : August 29, 2001  
 For : FOLDING CHAIR  
 Examiner : Brian Green  
 Art Unit : 3611

## CERTIFICATE OF MAILING

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Michael H. Trenholm, Reg. No. 37,743

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FEB 04 2004

GROUP 3600

Commissioner for Patents  
 P.O. Box 1450  
 Alexandria, VA 22313-1450

Sir:

Transmitted herewith for filing in the above-identified application are the following enclosures:

- (X) Response to Office Action in eleven (11) pages.
- (X) One (1) sheet marked up drawings;
- (X) One (1) replacement sheet of drawings
- (X) The present application qualifies for small entity status under 37 C.F.R. § 1.27.

The fee has been calculated as shown below:

FEE CALCULATION				
FEE TYPE		FEE CODE	CALCULATION	TOTAL
Total Claims	15 - 0 = 0	2202 (\$9)	0 x 9 =	\$0
Independent Claims	2 - 0 = 0	2201 (\$43)	0 x 43 =	\$0
Multiple Claim		2203 (\$145)		\$0
1 Month Extension		2251 (\$55)		\$
2 Month Extension		2252 (\$210)		\$
3 Month Extension		2253 (\$475)		\$475
			<b>TOTAL FEE DUE</b>	<b>\$475</b>

- (X) An extension of time is hereby requested by payment of the appropriate fee indicated above.
- (X) A check in the amount of \$475.00 is enclosed.

Docket No.: HENRYWU.037A

Customer No.: 20,995

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- (X) Return prepaid postcard.
  - (X) Please charge any additional fees, including any fees for additional extension of time, or credit overpayment to Deposit Account No. 11-1410.

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Michael H. Trenholm  
Registration No. 37,743  
Attorney of Record  
Customer No. 20,995  
(909) 781-9231

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